

1 for B

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE APPLICATION OF: )  
 )  
**TRAUTMAN, et al.** )  
 )  
FOR: **DEVICE FOR ENHANCING** )  
**TRANSDERMAL AGENT FLUX** )  
 )  
SERIAL NO. **09/684,163** )  
 )  
FILED: **October 4, 2000** )  
 )  
ART UNIT NO: **1616** )  
 )  
EXAMINER: **Dodson, Shelly A.** )  
 )  
Attorney Docket No: **ARC 2685 N1** )

**PETITION UNDER 37 C.F.R. §1.181 TO**  
**WITHDRAW HOLDING OF ABANDONMENT**

Hon. Commissioner for Patents  
Mail Stop: Issue Fee  
Fax: (703) 872-9306  
P.O. Box 1450  
Alexandria, VA 22313

Dear Sir:

Applicants respectfully request that the Holding of Abandonment of the above referenced case be withdrawn on the basis of the following:

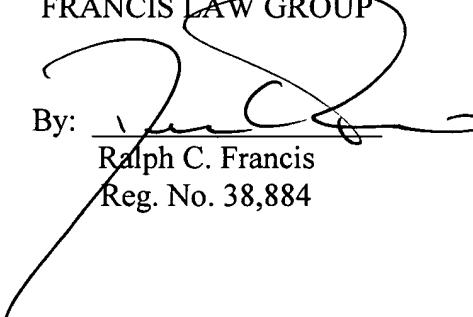
On August 11, 2004, the Notice of Allowance and Fee(s) was issued by the PTO. The due date to submit the issue fee was accordingly November 11, 2004.

On March 3, 2005, the PTO issued a Notice of Abandonment of the subject case. The Notice provides that Applicants' failed to timely pay the issue fee.

Applicants submit that on November 11, 2004, the issue fee was duly submitted to the PTO by Assignee, ALZA Corp. Copies of the Fee Transmittal, which was submitted via fax at 11:07 am, and Fax Confirmation Report, indicating successful transmission, are attached in Appendix A.

Applicants accordingly respectfully request that the holding of abandonment be withdrawn.

Respectfully submitted,  
FRANCIS LAW GROUP

By:   
Ralph C. Francis  
Reg. No. 38,884

Dated: April 4, 2005  
1942 Embarcadero  
Oakland, CA 94606  
Tel: (510) 533-1100

I hereby certify that this document is being deposited with the United States Postal Service on this date April 5, 2005 in an envelope as "First Class Mail" addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Danielle Gragg  
Name of person mailing document

Danielle Gragg

**PART B - FEE(S) TRANSMITTAL**

OB/DKT  
ARO/1928

Complete and send this form, together with applicable fee(s), to: **Mail**

**Mail Stop ISSUE FEE**  
Commissioner for Patents  
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**or Fax** (703) 746-4000

**INSTRUCTIONS:** This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

27777 7590 08/11/2004

PHILIP S. JOHNSON  
JOHNSON & JOHNSON  
ONE JOHNSON & JOHNSON PLAZA  
NEW BRUNSWICK, NJ 08933-7003

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

**Certificate of Mailing or Transmission**  
I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

Elisabeth S. Licata	(Depositor's name)
<i>Elisabeth S. Licata</i>	
(Signature)	
NOVEMBER 11, 2004	
(Date)	

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/684,163	10/04/2000	Joseph Creagan Trautman	ARC 2685N1	3671

TITLE OF INVENTION: DEVICE FOR ENHANCING TRANSDERMAL AGENT FLUX

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$0	\$1330	11/12/2004
EXAMINER		ART UNIT	CLASS-SUBCLASS	1370	
DODSON, SHELLEY A		1616	424-449000		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/12) attached.  
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, 1 \_\_\_\_\_  
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 2 \_\_\_\_\_  
3 \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Alza Corporation

Mountain View, CA

Please check the appropriate assignee category or categories (will not be printed on the patent):  individual  corporation or other private group entity  government

4a. The following fee(s) are enclosed:

4b. Payment of Fee(s):

Issue Fee  
 Publication Fee (No small entity discount permitted)  
 Advance Order - # of Copies \_\_\_\_\_

A check in the amount of the fee(s) is enclosed.

Payment by credit card. Form PTO-2038 is attached.

The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 10-09150 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

b. Applicant is not claiming SMALL ENTITY status. See, e.g., 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

(Authorized Signature) *[Signature]* (Date) *[Date]*

Reg. No: 32,019

November 11, 2004.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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## \*\* Transmit Conf. Report \*\*

P.1

Nov 11 2004 11:07

Fax/Phone Number	Mode	Start	Time	Page	Result	Note
7037464000	NORMAL	11,11:07	0'25"	1	#OK	

\* Please note "OK"  
Result:

OB/OK-  
AR01928

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450  
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Elisabeth S. Licata (Deponent's name)  
Elisabeth S. Licata (Signature)  
November 11/2004 (Date)

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DODSON, SHELLEY A	1616	424-449000			

Change of correspondence address or indication of "Fee Address" (37 CFR 1.163).

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"Fee Address" indication (or "Fee Address" indication form PTO/SB/47, Rev. 03-02 or more recent) attached. Use of a Customer Number is required.

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## (B) RESIDENCE: (CITY and STATE OR COUNTRY)

Alza Corporation  
Mountain View, CA

Please check the appropriate assignee category or categories (will not be printed on the patent):  individual  corporation or other private group entity  government

1a. The following fee(s) are enclosed:

4b. Payment of Fee(s):

Status Fee

A check in the amount of the fee(s) is enclosed.

Publication Fee (No small entity discount permitted)

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The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 10-01450 (enclose an extra copy of this form).

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